

# PUBLIC HEALTH BYTES

www.publichealthbytes.org

Henrico Health Department's Newsletter

Working in partnership with the citizens of Henrico County to create the conditions for health.

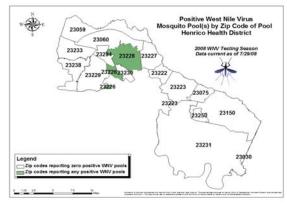
July 2008 Volume 4 Issue 7

#### Communicable Diseases

Henrico Roundup: Pertussis case in western Henrico -Henrico Health District has become aware of one confirmed *B*. pertussis case in the west end of the county. Pertussis is highly contagious and can occur among persons of any age regardless of immunization status. Consider pertussis when evaluating patients with an acute cough illness characterized by cough of prolonged duration or cough with paroxysms, whooping, or post-tussive gagging/vomiting. Adults and very young infants may have atypical presentations. Please consider reviewing immunization records on your patients to ensure they are up to date with pertussis vaccinations. For more information on pertussis, please see the "Pertussis Resources" link at http://www.co.henrico.va.us/health/health provider.html Salmonella Saintpaul: As of 7/29/2008, the national Salmonella Saintpaul case count stood at 1,307, of which 31 were Virginia residents. No cases have been reported in Henrico residents to date. See: http://www.cdc.gov/salmonella/saintpaul/

#### **Environmental Health**

Arboviral disease – Henrico County has reported its first West Nile Virus (WNV) positive mosquito pools in zip codes 23226 and 23228. Pools in Richmond City have also tested positive. To date (7/30/2008), there have been no human cases of WNV reported in Virginia for the 2008 season, however, a human case of La Crosse encephalitis (LAC) in Rockingham Co. was confirmed. LAC infections are seen primarily in children under the age of 16, and rarely affect adults. Please remind patients to practice arboviral disease prevention, including use of recommended repellents.



## Community Health Improvement

Help us save the next baby! To capitalize on the ongoing Richmond regional media campaign, Henrico County is implementing strategic educational intervention programs in several at-risk areas, including Henrico Arms, Seven Gables, and Essex Village. Contact us if you can participate or have activities in those areas. Together we can save the next baby!

## Pandemic Flu - ALERT PHASE WHO: 3; US: 0

Pandemic/Avian Flu Update: Human Cases - No new human H5N1 infections were confirmed since last report. The case fatality rate stands at 63.1%. **Pandemic** Vaccination Allocation - The U.S. Departments of Health and Human Services (HHS) and Homeland Security (DHS) released guidance on allocating pandemic influenza vaccine.

See: http://www.hhs.gov/news/press/2008pres/07/20080723a.html

### **Emergency Preparedness**

**Medical Reserve Corps:** The Henrico MRC has published its first newsletter. "MRC Voice" was distributed to volunteers, health department employees, businesses, health care facilities and other partners. For copies please go to the MRC website, <a href="http://www.co.henrico.va.us/health/mrc.html">http://www.co.henrico.va.us/health/mrc.html</a> *Floods:* From the CDC – "Exposure to flood waters does not increase the risk of tetanus, and tetanus immunization campaigns are not needed. While documentation of vaccination is preferred, it should not be a pre-requisite for work. During flood cleanup, the risk of wounds may be increased. For this reason, workers should be sure that they are up-to-date with tetanus vaccination, ideally before starting cleanup activities. Adults need a tetanus booster shot every 10 years. Td or Tdap can be used; getting Tdap instead of Td for one tetanus booster during adulthood is recommended to maintain protection against pertussis."

See: http://emergency.cdc.gov/disasters/floods/

## **Prevention Updates**

United States Preventive Services Task Force (USPSTF) **Undates:** The USPSTF recommends screening for hearing loss in all newborn infants. Grade B recommendation. See http://www.ahrq.gov/clinic/uspstf/uspsnbhr.htm

Fluoroquinolones and tendon problems: On July 8, 2008, the FDA issued an alert stating it will require quinolone manufacturers to add a boxed warning regarding the increased risk of tendonitis and tendon rupture with these products. Adverse effects regarding tendons are not new for quinolones, but the FDA is seeking to strengthen existing warnings by requiring a boxed warning. Patients at even higher risk of quinolone-associated tendonitis or tendon rupture include age > 60, corticosteroid use, or transplant recipients. The boxed warning only applies to quinolones being used systemically, NOT ophthalmic or otic formulations. http://www.fda.gov/bbs/topics/NEWS/2008/NEW01858.html

#### Prepared by Henrico Health District:

Mark J. Levine, MD, MPH Brooke Rossheim, MD, MPH J. Rebecca Early, MPH Steven Parker, BS

District Health Director Public Health Fellow District Epidemiologist District Emergency Planner

Tel: (804) 501-4522 Fax: (804) 501-4232 Emergency Number: 1-866-531-3068 http://www.HenricoHealth.org